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FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMR APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response.....16.00

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SECTION ONLY

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	c if this is an amendment and name has changed, and it	ndicate change.)	(2)
Series B Convertible Prefe	AND COLUMN COLUM		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE	LEGINED WAS
Type of Filing: New Fili	ing Amendment		
	A. BASIC IDEN	TIFICATION DATA	SEP 2 n 2nna
1. Enter the information rec	quested about the issuer		
Name of Issuer (☐ check if Oco I, Inc.	this is an amendment and name has changed, and ind		The state of the s
Address of Executive Office	es (Number and Street, City, State, Zip Code)	Telephone Number (incl	uding Area Code) 79 / (2)
339 Boston Post Road		(978) 443-1000	
Sudbury, MA 01776			\ \ \
Address of Principal Busine (if different from Executive	ss Operations (Number and Street, City, State, Zip Co Offices)	de) Telephone Number (incl	luding Area Code)
Brief Description of Busine	SS		
Software Company			
	 		- \$ 1880 ABIN BIBIN DINA NUNG BABUN BABUN NIBA NIBA NIBA NIBA
Type of Business Organizat			
□ corporation	☐limited partnership, already formed	other (please specify):	
business trust	☐limited partnership, to be formed	Under (prease specify).	04043842
	Month Ye	ат	01010012
Actual or Estimated Date of	Incorporation or Organization: 1 2 9	9 🛭 Actual 🔲 Estimated	
Jurisdiction of Incorporation	n or Organization: (Enter two-letter U.S. Postal Service	e abbreviation for State:	
	CN for Canada; FN for ot	ther foreign jurisdiction)	
GENERAL INSTRUCTION	ONS		

Rederal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 776(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valld OMB control number.

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: X Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and X Each general and managing partner of partnership issuers. □ Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) O'Conor, George W. Business or Residence Address (Number and Street, City, State, Zip Code) 339 Boston Post Road, Sudbury, MA 01776 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner Check Box(es) that Apply: Promoter ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Check Box(es) that Apply: Promoter Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INFO	RMATIO	N ABOU	T OFFER	ING		-			
1. Has t	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								******	Yes	No ⊠			
				A	ınswer also	in Append	lix, Column	2, if filing	under ULO	E.				
B. INFORMATION ABOUT OFFERING 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for splicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC end/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] (AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [MT] [NF] [NV] [NH] [NT] [NM] [NV] [NM] [NV] [NM] [NV] [NM] [NV] [NM] [NV] [NM] [NV] [NV] [PR] [PR] [PR] [PR] [PR] [PR] [PR] [PR									S N/A					
3. Does	the offering	permit join	t ownership	of a single	unit?				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Yes	No
			-	_										⋈
remu perso five (only.	neration for a on or agent of (5) persons to	solicitation fabroker of belisted a	of purchase r dealer reg re associate	ers in conne istered with	ction with a the SEC at	sales of second/or with a	urities in th a state or st	e offering. ates, list the	If a person name of th	to be listed e broker or	is an assoc dealer. If r	iated nore than		
	Last name fi	rst, if indivi	dual)											
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	sociated Bro	ker or Deal	er		·····								······································	
States in Wi	hich Person [isted Has 5	Solicited or	Intends to S	Solicit Purc	hasers								
(Chec	k "All States'	" or check i	ndividual S	tates)	••••••	•••••••		**************	••••••		All States			
(IL) [MT]	(IN) (NE)	[IA] [NV]	(KS)	[KY] [NJ]	[LA] [NM]	[MÉ] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
Full Name (Last name fi	rst, if indiv	idual)	- • • • • • • • • • • • • • • • • • • •										
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	sociated Bro	ker or Deal	er						-	·				
States in W	hich Person I	Listed Has	Solicited or	Intends to	Solicit Purc	hasers								
(Check "All	States" or cl	neck indivi	iual States)	**********							All States			
Full Name (Last name fi	rst, if indiv	idual)											
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	sociated Bro	ker or Deal	ег											
States in W	hich Person 1	Listed Has	Solicited or	Intends to	Solicit Purc	hasers								
(Check "All	l States" or cl	heck indivi	dual States)		***********			••••••			All States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	(AZ) [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] (MD] (NC) [VA]	[DC] [MA] [ND] [WA]	[FL] [M1] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	s
	Equity	\$ 2,319,996	\$ 2,319,996
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	\$	\$
	Other (Specify)	\$	S
	Total	\$ 2,319,996	\$ 2,319,996
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$ 2,319,996
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		
	Rule 504		S
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		S
	Legal Fees	Ø	\$ 35,000
	Accounting Fees		\$
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		\$
	Total	Ø	\$ 35,000

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PRO	CEF	DS			
4.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."						
						\$ 2,284,996	
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.						
		Of	ficer	ments to s, Directo Affiliates	ors,	Payments To Others	,
	Salaries and fees	🗆	\$		ļ	□ \$	
	Purchase of real estate	🗖	s			□ s	
	Purchase, rental or leasing and installation of machinery and equipment	🗖	\$		_	s	
1	Construction or leasing of plant buildings and facilities	🗀	s	. e t	y.#	□·s	
::	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).		s	•		□ \$	*!
٠,	Repayment of indebtedness		\$	T. 47	e, set	□ s	
	Working capital		<u>s</u>	7, 3	a a	፟ \$ 2,284,996	
	Other (specify):		\$. r	٠	□ \$	
	Column Totals	🗆	\$	t er	e v	⊠ \$ 2,284,996	
٠٠ <i>٠</i> پ	Total Payments Listed (column totals added)			⊠ s	2,284	,996	
	D. FEDERAL SIGNATURE				_		
an t	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed indertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its accredited investor pursuant to paragraph (b)(2) of Rule 502.						
ls O	suer (Print or Type) co I, Inc.	ate entember	15,	2004			
	ame of Signer (Print or Type) eorge W. O'Conor President and Chief Executive Officer			in and in	 1:}™		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION